## Statewide Health Improvement Program Multi-grantee Health Care Work Group Meeting

December 14, 3-4:30pm Southdale Library, Helen Young Room

## **MEETING MINUTES**

Attendees: Patricia Talbert (MHP), Arpita D. (sp?) (Preferred One) Carol Berg (UCare), Sandy Lien (Medica), Patty Bowler (MDHFS), Nancy Sherwood (Health Partners Research Foundation/University of MN), Ron Jankowski (Freemont Community Health), Randall Warren (Health Partners), Marc Manley (BCBS), Renee Gust (Hennepin County), Melissa Marshall (ICSI), Kristen Godfrey (MDHFS), Ellie Zuehlke (Allina), Megan Ellingson (MDHFS), Courtney Jordan (Physician Consultant), Eileen O'Connell (Bloomington Public Health), Nancy Mary Larwik (NHCN), Ruth Tripp (Bloomington Public Health)

Agenda Item	1. Welcome and Introductions
Discussion	Courtney Jordan, City of Minneapolis MD Consultant for this project,
	convened the meeting and called for introductions.
Next Steps	Update Nancy Sherwood's affiliation
Agenda Item	2. Background and summary of progress to date
Discussion	<ul> <li>Megan Ellingson, City of Minneapolis SHIP Multi-Grantee Coordinator, discussed the partners, background, and budget of the SHIP Multi-grant as found on the Health Care Work Group Summary and SHIP Multi-Grantee Budget Summary handouts. MDHFS is the fiscal agent of the grant and is partnering with Bloomington Public Health and Hennepin County.</li> <li>The future outcome of the work group is implementation of ICSI guidelines for chart documentation, patient counseling, and referrals for obesity and chronic disease prevention and management.</li> <li>There is a draft list of 10 family practice clinics to approach to participate in the SHIP multi-grantee project. The work group will help finalize the clinic list, as well as the clinic system(s) for the project's work.</li> <li>Incentives for participating clinics include money and resources. \$5,000</li> </ul>
Next Steps	<ul> <li>per clinic, \$15-20,000 for clinic system.</li> <li>Review and finalize the clinic and system list at the January Work Group meeting.</li> </ul>
Agenda Item	3. Work Group Purpose
Discussion	<ul> <li>Courtney Jordan discussed the work group purpose as outlined on the Health Care Work Group Summary handout.</li> <li>The work group will be assisting with defining and refining the intervention at specific clinics and clinic system(s), as well as work on broader issues (ex: reimbursement, referrals, EMR) that impact all clinics implementing the guidelines. Work Group task forces may be formed in these areas as needed.</li> </ul>
Next Steps	None discussed.

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Agenda Item	4. Discussion of Work Group roles and process
Discussion	• The group agreed to meet one time per month for the first six months and
	then quarterly.
	• Decision making – recommendations will move forward with 75% majority
	vote of members in attendance
	Hennepin County has started working with some clinics to implement the
	guidelines under their Hennepin County-specific SHIP grant.
	• For the referral network, clinic systems cross county lines so having a
	uniform system across jurisdictions is required for easy adoption and use.
Next Steps	Work group members to contact Megan Ellingson or Courtney Jordan if
	interested in being co-chair of the work group.
Agenda Item	5. Discussion of current guideline use
Discussion	NHCN – Not sure, will defer until next meeting.
	MHP – Use of guidelines with evaluation, not aggressive.
	Preferred One – Will defer until next meeting.
	• UCare – ICSI guidelines are used for provider awareness activities (e.g.
	newsletters, articles, etc.) but individual clinics determine guideline
	implementation.
	Medica – Recommended for all providers. Not sure if Medica pays on all
	CPT codes.
	Health Partners – High BMI capture rate and smoking cessation focus but
	does not necessarily follow through to counseling and follow-up.
	Assessments for employer driven plans, but not in clinics. Long standing
	relationship with ICSI. More outreach for referrals is needed. Providers
	cannot be expected to know all available resources.
	• Freemont – Nutrition, exercise, BMI, obesity and chronic disease
	prevention and management are all actively assessed and recorded by
	providers. On site dietician and outreach. 211 is utilized for patient
	referrals. Would like to see a family centered "hand out and hand off"
	referral resource that acts as a patient Ombudsman.
	BCBS – Promotes use of guidelines, pay for performance for providers to
	implement. Unlimited provider discussions regarding obesity are free.
	Online modules for chronic disease prevention are free. Discounts for
	Weight Watchers and FDA approved weight loss drugs. Would like to see
	a referral network modeled after "Call It Quits" program with one place to
	refer patients and coordination of all health plans.
	Allina – Currently working with Wright County on SHIP, will report back
	next meeting. Would like to see a referral system that can cross county
	boundaries.
	• ICSI – Suggested implementing part of the guidelines in clinics rather than
	in their entirety.
	Other discussion on referral models included the perinatal service matrix for
	government programs, consistent set of services and reimbursement by all
	plans, link between the community and the provider, referral system based
	on effectiveness of the intervention, extensive list of services that can be

	accessed electronically or by phone easily by patient or provider, and
	referral system coordinated and updated by one entity.
Next Steps	Work group members to look into billing and reimbursement practices on
_	ICSI guidelines.
	NHCN, Preferred One and Allina to share current guideline usage.
Agenda Item	6. Next Steps
Discussion	The next meeting will be in January, date will be determined by electronic
	meeting maker.
	MDHFS will administer an electronic survey for work group feedback.
Next Steps	Items for January Work group meeting:
	Discuss project implementation plan.
	Review Hennepin County's experiences, including MD consultant clinic
	presentation and evaluation tools.
	Discuss billing and public programs coverage
	Work group members to participate in survey to include gathering
	information on organizations' experiences with implementing ICSI
	guidelines before next meeting